

Return to:

Town of Truro, Town Hall

Box 2030

Truro, MA 02666-2030

Telephone: 508/349-7004 Fax: 508/349-5505

## EMPLOYMENT APPLICATION

## PLEASE READ BEFORE FILLING OUT THIS APPLICATION

The Town of Truro does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, handicap, veteran status, or on the basis of age. No question on this application is intended to secure information to be used for such discrimination.

To be sure your application is properly evaluated, all questions should be answered clearly, completely and accurately in your own handwriting. If you need more space, please attach a separate sheet. Please print and use ink.

PERSONAL			
Date			
Name			
Last	First		Middle
Address			
Number Street	City/Town	State	Zip Code
Mailing Address			
(If different) P.O. Box or Str	eet Address City/	Town State	Zip Code
		al Security Number	(optional)
Position(s) desired Salary desired		ble	
GENERAL INFORMA By whom or what source were yo			
	Newspaper or Other		
	s, can you furnish a work permit?		
Have you filed an application her Have you ever been employed he		If Yes, give date If Yes, give date	
Are you employed now?   Yes			
May we contact your present empgive reason	oloyer? Immediately After ac	cceptance of employ	ment $\square$ No. If no, please $\underline{\cdot}$
EMPLOYMENT EXP	ERIENCE		

Start with your present or last job. **Include** military service assignments and volunteer activities. **Exclude** organization names which indicate race, color, religion, sex or national origin.

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1)		
Employer	<u>Dates Employed</u> From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Job Title		
Supervisor		
Reason for Leaving		
2)		
Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Job Title		
Supervisor		
Reason for Leaving		
3)		
Employer	<u>Dates Employed</u> From To	
Address	Hourly Rate/Salary Starting Final	
Job Title		
Supervisor		
Reason for Leaving		

<u>4)</u>

Employer	<u>Dates Employed</u> From To	Work Performed
	10	

Address	Hourly Rate/Salary Starting Final	
Job Title		
Supervisor		
Reason for Leaving		
If you need additional space, please cont Describe other training, certifications, lic		pplicable to the job you are seeking.
If applying for a clerical position, please  Can you type? (W.P.M)  Have you used a computer/word process	Do you take dictation	
EDUCATION		
HIGH SCHOOL		Circle Last Year Completed 1 2 3 4
Complete Address		
Graduated Yes No	Major Course	
COLLEGE	Major Course of Study	Circle Last Year Completed 1 2 3 4
Complete Address		
Graduated Yes No	Degree or Certification Receiv	ved
OTHER SCHOOLS OR SPECIALIZED TRAINING	Major Course of Study	Circle Last Year Completed 1 2 3 4
Complete Address		
Graduated Yes No	Degree or Certification Receiv	ved
Scholastic Honors, Scholarships, etc., rec Do you intend to continue your education		No
SEALED RECORD NOTICE	Dates:	Honorable Discharge?
Have you ever been convicted of a felon Yes No If considered eligible f answered yes?	·	ng to voluntarily give details if you

You may omit any information or answer "no record" to the following questions regarding: 1. A first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace; or 2. Any conviction where there is a sealed record on file with the commissioner of probation or in any case of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal

prosecution.			
	not necessarily be a bar to eme violation and rehabilitation		e and time of offense,
Have you been convicted of ☐ Yes ☐ No If Yes, Ple	f a misdemeanor within the paease explain:	ast five years?	
examination for testing truth "It is unlawful in Massachus continued employment. An	setts to require or administer	e applying for a job or of thos a lie detector test as a conditi- aw shall be subject to crimina	e who are presently employed.
<b>REFERENCES</b> Please list below the name of	of three professional or work-	related references.	
NAME & TITLE	COMPANY	TELEPHONE	YEARS ACQUAINTED
AGREEMENT Please read before signing. NOTE: If you have any quebefore signing.	estions regarding the following	ng statement, please ask the P	Personnel Representative
I understand that receipt of	this application and the granti	ing of an interview does not i	mply that I will be employed.
and complete, and I unders further consideration for em that any offer of employmen	stand that any false information appropriate that any false information and the consideration of the standard standard false information and the standard fa	tion or material omission of lered justification for dismiss ctory replies from my referen	panying résumé, if any) is true fact may disqualify me from sal at a later date. I understand notes (and CORI, if applicable), of Truro at any time.
this application (and accon which may be required to employers and organization	npanying résumé, if any) to arrive at an employment of	provide the Town of Truro decision, and I voluntarily a ling such information. I rele	rs and organizations named in with any relevant information release such persons, schools, ease the Town of Truro against
Signature		Date	

For Personnel/Adr	ninistration Us	e Only			
Arrange Interview	☐ Yes ☐ No				
Remarks					
INTER	VIEWER		DATE		
Employed	☐ Yes ☐ No	Date of Employment			
Job Title		Hourly Rate/Salary		Department	
	E AND TITLE		DATE		
For Personnel Use	Only				
Position(s) Ap	plied For is Open:	☐ Yes ☐ No			
Position(s) Con	nsidered For:				